COLORADO
Department of Health Care
Policy & Financing

MEMORANDUM

TO:	**ACC Program Improvement Advisory Committee**
FROM:	**Provider & Community Issues Sub-committee**
DATE:	**04/16/2015**
RE:	**RCCO Map Revisions**

Principles for Map Revisions

The Provider & Community Issues sub-committee was tasked by PIAC in March of 2015 with forming a workgroup to discuss potential revisions to the RCCO map during the ACC re-procurement process. The workgroup was asked to "rank criteria that should be used in developing the map for the next iteration of the ACC." The workgroup has instead recommended – with the full support of P&CI – that the following principles should be considered before any map revisions are considered;

If revisions are to be made, RCCO maps should;

- Be patient-centric

- Strive for administrative simplification and increased efficiencies for HCPF and PCMPs

- Be data driven/ rely on predictive modeling and should examine the elements used in developing the original map including referral and access patterns, provider capacity, public health districts, community input, and population density

- Enhance behavioral integration and move closer to the integration of RCCO & BHO functions and financing

- Preserve the investment the State of Colorado has made in creating care coordination relationships, local capacity, and infrastructure

- Strive to leverage other systems of care (SEPs, CCBs, public health, hospitals)

- Be supported by a robust cost/benefit analysis of the changes being made

In its decision making process, the Department should;

- Be transparent

- Strive to hold clients harmless with any potential revisions

- Consider other options, such as attribution and cross-agency/cross-region communication and collaboration processes between partners in the ACC as a means to achieving these principles rather than a map change being a foregone conclusion.

- Consider how to reflect the fact that client/patient preferences for care may supersede their place of residence within our attribution and mapping models because where patients live may not reflect where they prefer to receive care

- Solicit client input regarding any revisions

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